

InfoFair Application

2005 Mayor's Neighborhood Summit

Organization Name *(as it should appear in print)* _____

Key Contact Name _____

Title _____

Address _____

City, State, Zip _____

Phone _____ Cell Phone _____

Fax _____

Email _____

PLEASE RESERVE A TABLE FOR US

_____ Whole 6-foot table - \$100 _____ Our table is for display only and will not be staffed

_____ Our table will be staffed for the morning session _____ Our table will be staffed for the lunch session

Exhibitor Name Badge

Reservation allows one Exhibitor Name Badge. Please list the name you wish placed on the Exhibitor Badge:

Additional Exhibitor Name Badges may be purchased for \$10.

Payment Information:

- ☐ My check, PAYABLE TO THE DEPARTMENT OF NEIGHBORHOODS, is enclosed.
☐ Please charge my Visa or MasterCard:

Account # _____ Expiration Date _____

Signature _____

Please return or fax completed form to:

Roberta Steutermann
The Convention Connection
8215 Shelbyville Road
Louisville, KY 40222
Phone: (502) 394-9930
Fax: (502) 394-9931
Email: Steutermann_cc@bellsouth.net



IMPORTANT: In order to prepare your table sign and print your organization name in the Summit Program, reservation form must be received no later than **FRIDAY, OCTOBER 28** to ensure that all benefits are received. Reservations will be accepted after the deadline, but all benefits cannot be guaranteed.